

FORM 1 GENERAL	 U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program <i>(Read the "General Instructions" before starting.)</i>	I. EPA I.D. NUMBER <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:5%;">S</td> <td style="width:15%;"></td> <td style="width:5%;">T/A</td> <td style="width:5%;">C</td> </tr> <tr> <td>F</td> <td></td> <td></td> <td>D</td> </tr> <tr> <td>1</td> <td>2</td> <td>13</td> <td>14</td> </tr> <tr> <td></td> <td></td> <td></td> <td>15</td> </tr> </table>	S		T/A	C	F			D	1	2	13	14				15																																						
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LABEL ITEMS I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY MAILING ADDRESS VI. FACILITY LOCATION		PLEASE PLACE LABEL IN THIS SPACE																																																						
II. POLLUTANT CHARACTERISTICS INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms .																																																								
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CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
C	7	0251	(specify) Raising Broiler Chickens	C	7	N/A	(specify) N/A
15	16	17	18	15	16	17	18
C. THIRD				D. FOURTH			
C	7	N/A	(specify) N/A	C	7	N/A	(specify) N/A
15	16	17	18	15	16	17	18

VIII. OPERATOR INFORMATION

A. NAME															B. Is the name listed in Item VIII-A also the owner?				
C	8	FAYYAZ MUKHTAR													<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				
15	16																		

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box: if "Other," specify.)

F = FEDERAL
S = STATE
P = PRIVATE *

M = PUBLIC (other than federal or state)
O = OTHER (specify)

P

(specify)

* S-Corporation owner/operator

D. PHONE (area code & no.)

(908) 296-2357

E. STREET OR P.O. BOX

PO BOX 218

F. CITY OR TOWN

OAK HALL

G. STATE

VA

H. ZIP CODE

23416

IX. INDIAN LAND

Is the facility located on Indian lands?
☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)										
C	9	N	N/A	C	9	P	N/A													
15	16	17	18	30	15	16	17	18												
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)										
C	9	U	N/A	C	9	1	VFG 250098	(specify) Poultry Waste Mgmt.												
15	16	17	18	30	15	16	17	18												
C. RCRA (Hazardous Wastes)										E. OTHER (specify)										
C	9	R	N/A	C	9	N/A	(specify)													
15	16	17	18	30	15	16	17	18												

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers, and other surface water bodies in the map area. See instructions for precise requirements. *Attached*

XII. NATURE OF BUSINESS (provide a brief description)

THE BUSINESS OF FPNA FARMS, INC. IS TO RAISE BROILER CHICKENS.

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XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)

FAYYAZ MUKHTAR, PRESIDENT

B. SIGNATURE

C. DATE SIGNED

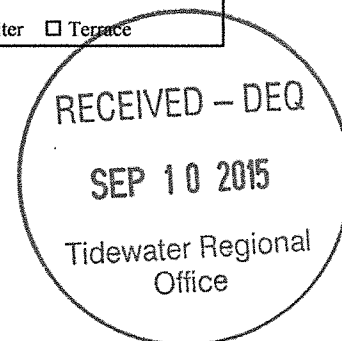
4/29/15

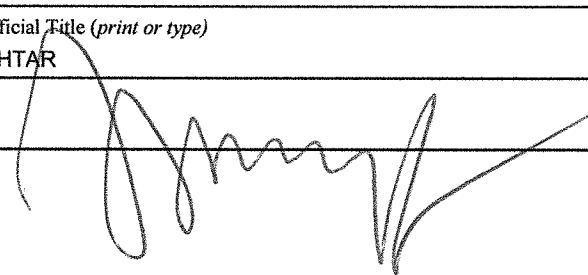
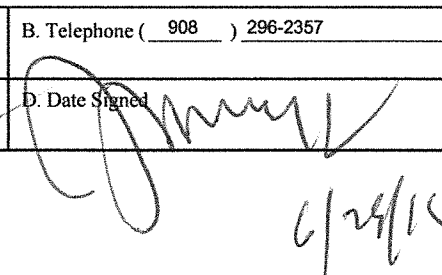
COMMENTS FOR OFFICIAL USE ONLY

C															
C															
15	16														55

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C. <input checked="" type="checkbox"/> TOPOGRAPHIC MAP <i>Attached</i>		
D. TYPE OF CONTAINMENT, STORAGE AND CAPACITY		
1. Type of Containment	Total Capacity (in gallons)	
<input type="checkbox"/> Lagoon		
<input type="checkbox"/> Holding Pond		
<input type="checkbox"/> Evaporation Pond		
<input checked="" type="checkbox"/> Other: Specify <u>ROOFED STORAGE SHED</u>	220'X41'	
2. Report the total number of acres contributing drainage: <u>N/A</u> acres		
3. Type of Storage	Total Number of Days	Total Capacity (gallons/tons)
<input type="checkbox"/> Anaerobic Lagoon		
<input type="checkbox"/> Storage Lagoon		
<input type="checkbox"/> Evaporation Pond		
<input type="checkbox"/> Aboveground Storage Tanks		
<input type="checkbox"/> Belowground Storage Tanks		
<input checked="" type="checkbox"/> Roofed Storage Shed	> 14	234 TONS
<input type="checkbox"/> Concrete Pad		
<input type="checkbox"/> Impervious Soil Pad		
<input type="checkbox"/> Other: Specify _____		
E. NUTRIENT MANAGEMENT PLAN		
<p>Note: Effective February 27, 2009, a permit application is not complete until a nutrient management plan is submitted to the Permitting Authority.</p> <p>1. Please indicate whether a nutrient management plan has been included with this permit application. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. If no, please explain: <u>N/A</u></p> <p>3. Is a nutrient management plan being implemented for the facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4. The date of the last review or revision of the nutrient management plan. Date: <u>10/09/14</u></p> <p>5. If not land applying, describe alternative use(s) of manure, litter, and/or wastewater: <u>COMPOSTING & 100% Transferred to others -</u></p>		
F. LAND APPLICATION BEST MANAGEMENT PRACTICES <u>N/A NO Land Application at site</u>		
<p>Please check any of the following best management practices that are being implemented at the facility to control runoff and protect water quality:</p> <p><input type="checkbox"/> Buffers <input type="checkbox"/> Setbacks <input type="checkbox"/> Conservation tillage <input type="checkbox"/> Constructed wetlands <input type="checkbox"/> Infiltration field <input type="checkbox"/> Grass filter <input type="checkbox"/> Terrace</p>		



III. CONCENTRATED AQUATIC ANIMAL PRODUCTION FACILITY CHARACTERISTICS <i>N/A</i>					
A. For each outfall give the maximum daily flow, maximum 30-day flow, and the long-term average flow.			B. Indicate the total number of ponds, raceways, and similar structures in your facility.		
1. Outfall No.	2. Flow (<i>gallons per day</i>)		1. Ponds	2. Raceways	3. Other
	a. Maximum Daily	b. Maximum 30 Day	c. Long Term Average	C. Provide the name of the receiving water and the source of water used by your facility.	
				1. Receiving Water	2. Water Source
D. List the species of fish or aquatic animals held and fed at your facility. For each species, give the total weight produced by your facility per year in pounds of harvestable weight, and also give the maximum weight present at any one time.					
1. Cold Water Species			2. Warm Water Species		
a. Species	b. Harvestable Weight (<i>pounds</i>)		a. Species	b. Harvestable Weight (<i>pounds</i>)	
	(1) Total Yearly	(2) Maximum		(1) Total Yearly	(2) Maximum
E. Report the total pounds of food during the calendar month of maximum feeding.			1. Month	2. Pounds of Food	
IV. CERTIFICATION					
<i>I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.</i>					
A. Name and Official Title (<i>print or type</i>)			B. Telephone (<u>908</u>) <u>296-2357</u>		
FAYYAZ MUKHTAR					
C. Signature			D. Date Signed		
			 6/24/15		

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**VIRGINIA POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT
CONCENTRATED ANIMAL FEEDING OPERATIONS**

PERMIT APPLICATION ADDENDUM

PLEASE TYPE OR PRINT ALL INFORMATION - ALL PARTS OF THIS FORM MUST BE COMPLETED

For DEQ Use Only:

Complete: Yes ☐ No ☐

Initials: _____

Date: _____

I. CONTACT INFORMATION

Owner Name:	FAYYAZ MUKHTAR				
Mailing Address:	P.O. Box 218				
City:	OAK Hall	State:	VA	Zip Code:	23416
E-Mail Address:	PARULFAYYAZ1111@Gmail.com				
Business Phone:	-	Mobile Phone:	908-296-2357	Home Phone:	- N/A.
Best day of the week & time to contact the applicant:	Day(s)		Time(s)		<input checked="" type="checkbox"/> AM
	Any Day		Any Time		<input checked="" type="checkbox"/> PM

II. FARM/FACILITY INFORMATION

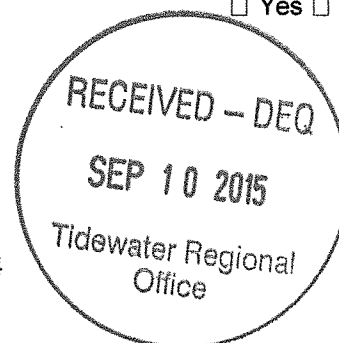
Farm/Facility Name:	FPNA FARMS, INC.		
Location:	5753 NEAL PARKER Road, Withams, VA 23488.		
Does Farm/Facility have an existing permit?	<input checked="" type="checkbox"/> Yes	If yes, Permit Number:	VPG 250098
	<input type="checkbox"/> No		

III. FARM OPERATING MANUAL

- A. Has a Farm Operating Manual been developed for this facility? ☐ Yes ☒ No
- B. If yes, provide the date of the last review/revision of the Farm Operating Manual. Date: N/A.
- C. A copy of the Manual (if already developed) is attached: ☐ Yes ☒ No.
The attached copy may be a hard copy or an electronic copy.

IV. GROUNDWATER MONITORING PLAN

- A. If the facility has an existing permit, is groundwater monitoring required? ☐ Yes ☒ No
- B. If yes, has a Groundwater Monitoring Plan been developed for this facility? ☐ Yes ☐ No ☒ N/A
- C. If yes, provide the date of the last review/revision of the Groundwater Monitoring Plan. Date: N/A.
- D. If no, please explain: No liquid manure at site - Disposal Shed is covered to protect from wind + precipitation. Ditches + Fens are used for occasional water run-off.
- E. A copy of the Plan (if already developed) is attached: ☐ Yes ☐ No ☒ N/A
The attached copy may be a hard copy or an electronic copy.



**VIRGINIA POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT
CONCENTRATED ANIMAL FEEDING OPERATIONS**

PERMIT APPLICATION ADDENDUM

For DEQ Use Only:

Complete: Yes ☐ No ☐

Initials: _____

Date: _____

PLEASE TYPE OR PRINT ALL INFORMATION - ALL PARTS OF THIS FORM MUST BE COMPLETED

I. CONTACT INFORMATION

Owner Name:	FAYYAZ MUKHTAR				
Mailing Address:	P.O. BOX 218				
City:	OAK HALL	State:	VA	Zip Code:	23416
E-Mail Address:	PARUIFAYYAZ1111@GMAIL.COM				
Business Phone:	- N/A -	Mobile Phone:	908 296 2357	Home Phone:	- N/A -
Best day of the week & time to contact the applicant:	Day(s)		Time(s)		<input checked="" type="checkbox"/> AM
	ALL		ALL		<input checked="" type="checkbox"/> PM

II. FARM/FACILITY INFORMATION

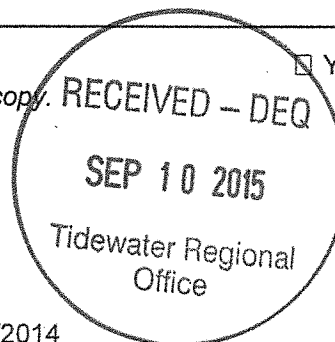
Farm/Facility Name:	FPNA FARMS, INC.		
Location:	5753 NEAL PARKER ROAD, WITHAMS, VA 23488		
Does Farm/Facility have an existing permit?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Permit Number:	VPG 250098

III. FARM OPERATING MANUAL

- A. Has a Farm Operating Manual been developed for this facility? ☐ Yes ☒ No
- B. If yes, provide the date of the last review/revision of the Farm Operating Manual. Date: N/A
- C. A copy of the Manual (if already developed) is attached: N/A ☐ Yes ☒ No.
The attached copy may be a hard copy or an electronic copy.

IV. GROUNDWATER MONITORING PLAN

- A. If the facility has an existing permit, is groundwater monitoring required? ☐ Yes ☒ No
- B. If yes, has a Groundwater Monitoring Plan been developed for this facility? ☐ Yes ☐ No ☒ N/A
- C. If yes, provide the date of the last review/revision of the Groundwater Monitoring Plan. Date: N/A
- D. If no, please explain: NO liquid manure at site - Manure shed is covered to protect from wind & precipitation.
- E. A copy of the Plan (if already developed) is attached: ☐ Yes ☐ No ☒ N/A
The attached copy may be a hard copy or an electronic copy.



V. DISCHARGE POINT AND BEST MANAGEMENT PRACTICES (BMPs) RELATED TO A DISCHARGE POINT

For each discharge point, provide the following information in the table below:

- a descriptive name of the discharge point;
- the latitude and longitude of its location;
- the name of the nearest potential receiving water;
- all areas contributing manure, litter, process wastewater, or storm water from the facility; and
- the treatment received or BMPs utilized, installed or constructed prior to the discharge point.

For DEQ Use: I.D. Number	Discharge Point	Latitude	Longitude	Name of Nearest Potential Receiving Water	Area Contributing Flow	Treatment or BMPs
	1 Runoff House #5	37°57'59"N	-75°35'33"W	Bullgoggar Creek	Shed - Run off	Ditches, Fans
	2 Runoff House #6	37°57'55"N	-75°35'30"W	Tributary	Shed - Run off	Ditches, Fans
	3					
	4					
	5					

VI. BEST MANAGEMENT PRACTICES (BMPs)

A. BMPs are utilized, installed or constructed for each of the areas listed in Section V above.

B. If no, please explain: N/A

☒ Yes ☐ No

C. Attach to this Addendum, a description of the BMPs listed above in Section V or a copy of the Farm Operating Manual (if already developed). The attached copy may be a hard copy or an electronic copy.

VII. OTHER ATTACHMENTS (see instructions for requirements)

A. The completed and signed Local Government Ordinance Form (LGOF) is attached:

☐ Yes ☒ No ☒ On file with DEQ

B. A copy of the Department of Conservation and Recreation (DCR) Nutrient Management Plan (NMP) approval letter is attached:

☒ Yes ☐ No

VIII. MORTALITY DISPOSAL METHODS

A. Indicate the mortality disposal method or methods to be utilized to ensure compliance with the permit.

☐ Render ☒ Compost ☐ Incinerate ☐ Landfill ☐ Other:

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B. Attach to this Addendum, a description of the mortality disposal method or methods to be utilized to ensure compliance with the permit. Include a description of the site where the mortalities will be handled. The attached copy may be a hard copy or an electronic copy.

In the case of a catastrophic animal mortality, disposal methods will be consistent with appropriate practices and methods approved by the State Veterinarian's Office and this Department. These same practices and methods shall be documented in the Farm Operating Manual.

IX. CHEMICAL HANDLING METHODS

Attach to this Addendum, a description of the practices, procedures and methods which will be followed to ensure that chemicals and other contaminants handled at the facility are not disposed of in any manure, process wastewater, or storm water storage or treatment system unless such systems are specifically designed to treat such chemicals and other contaminants. These same practices, procedures and methods shall be included in the Farm Operating Manual. *The attached copy may be a hard copy or an electronic copy.*

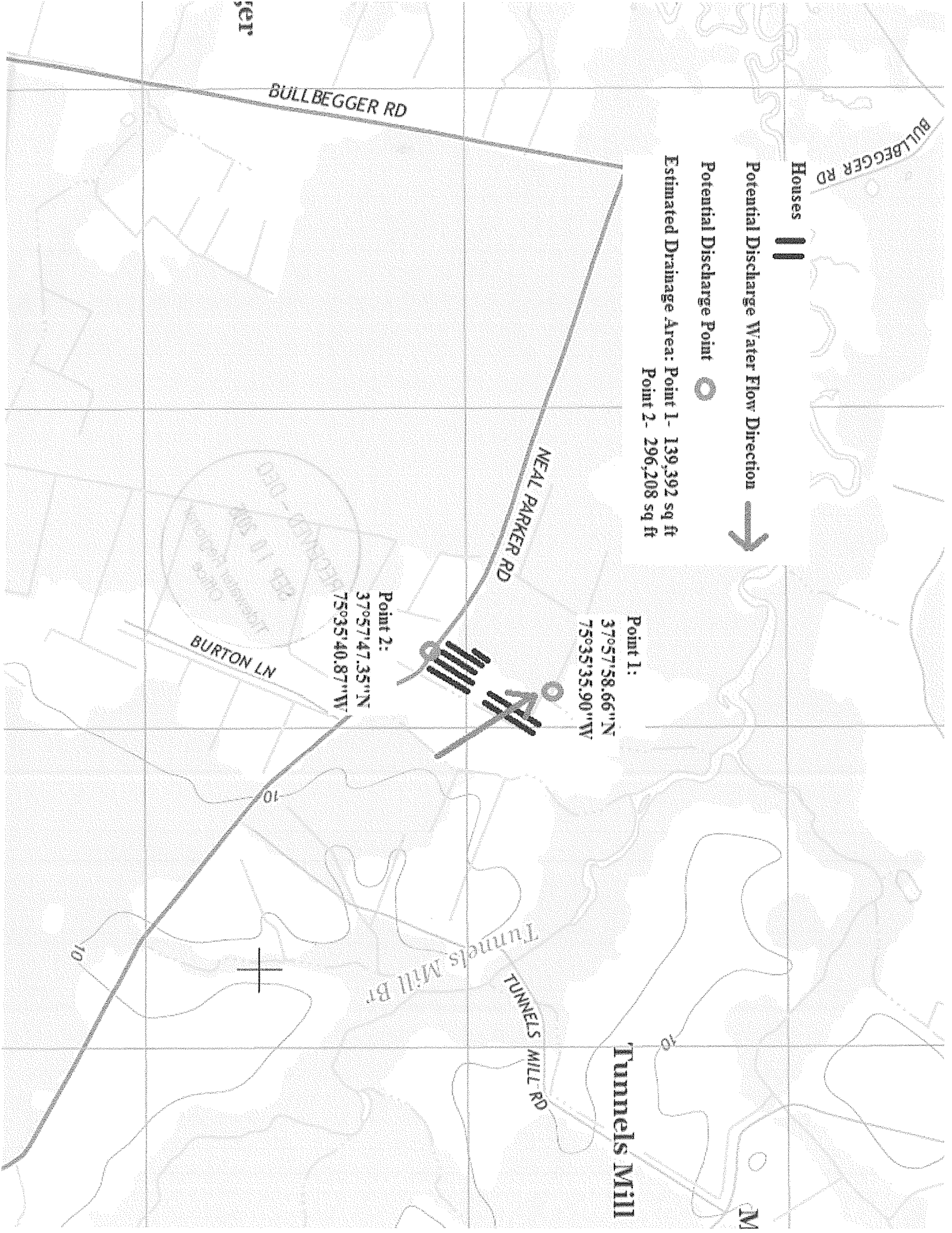
X. CERTIFICATION STATEMENT

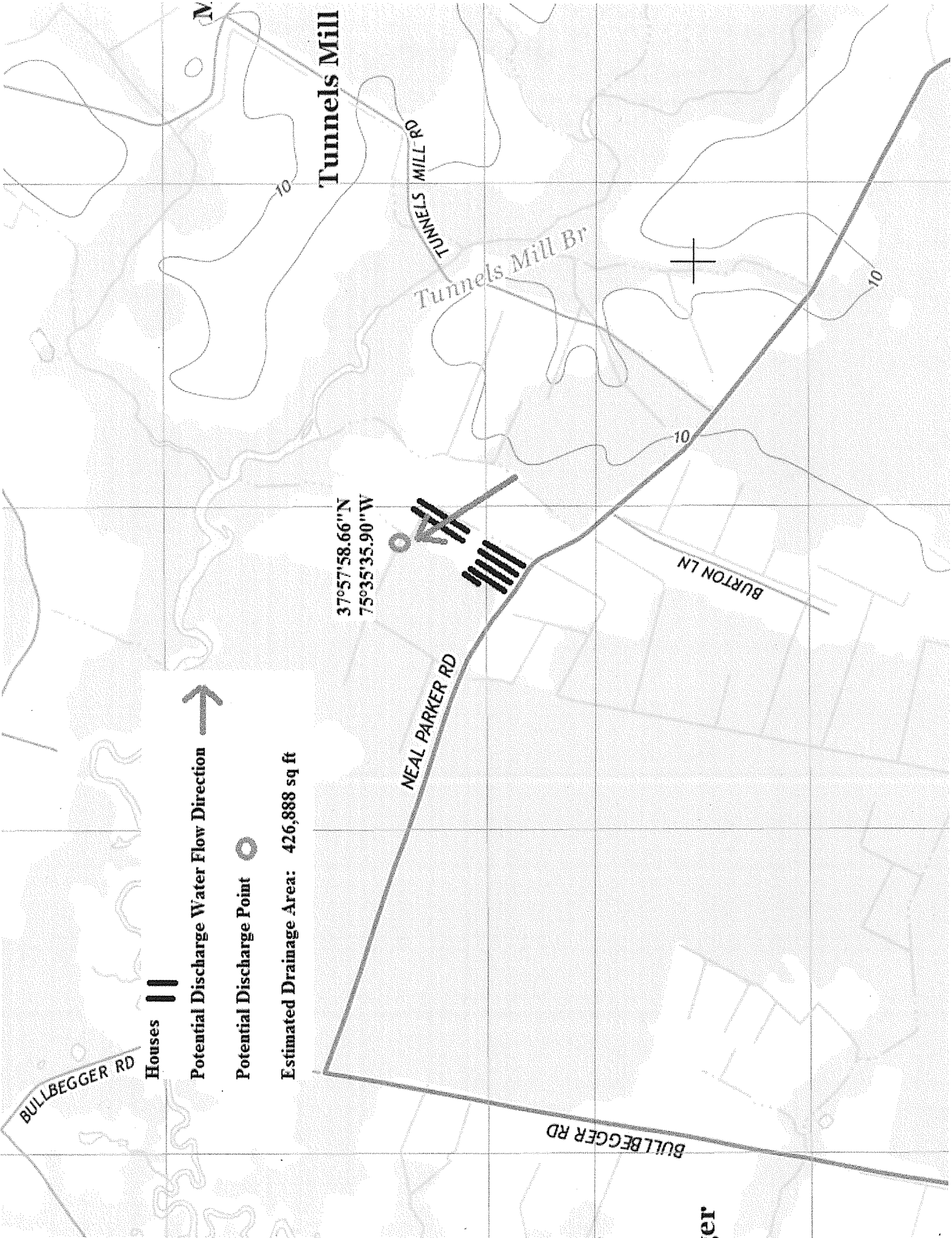
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed Name: FAYYAZ MUKHTAR Official Title: PRESIDENT

Signature: [Handwritten Signature] Date: 6/29/15







BULLBEGGER RD

Houses

Potential Discharge Water Flow Direction

Potential Discharge Point

Estimated Drainage Area: 426,888 sq ft

37°57'58.66"N
75°35'35.90"W

NEAL PARKER RD

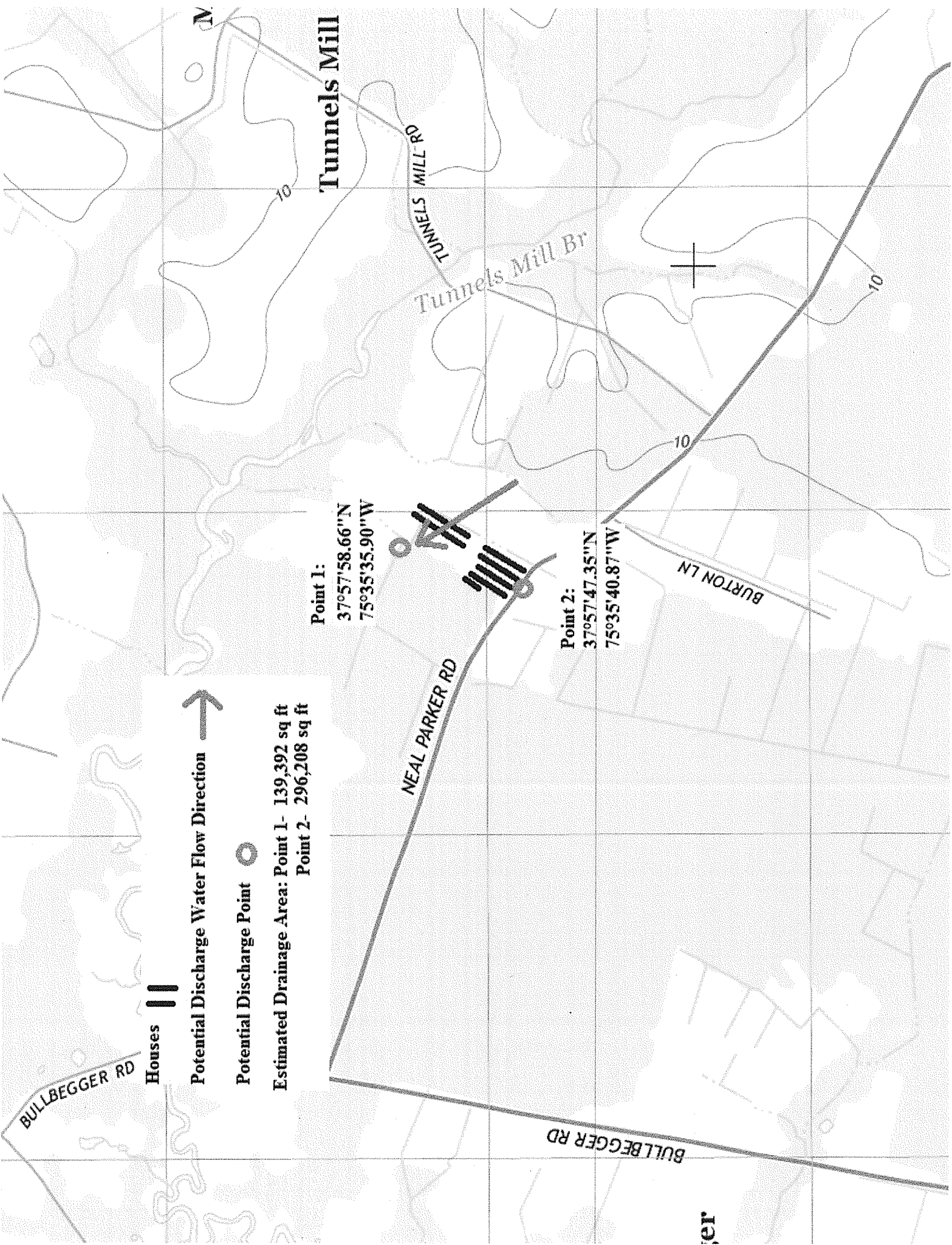
TUNNELS MILL RD

Tunnels Mill Br

BURTON LN

BULLBEGGER RD

er



Houses

Potential Discharge Water Flow Direction

Potential Discharge Point

Estimated Drainage Area: Point 1- 139,392 sq ft
Point 2- 296,208 sq ft

Point 1:
37°57'58.66"N
75°35'35.90"W

Point 2:
37°57'47.35"N
75°35'40.87"W

Tunnels Mill

NEAL PARKER RD

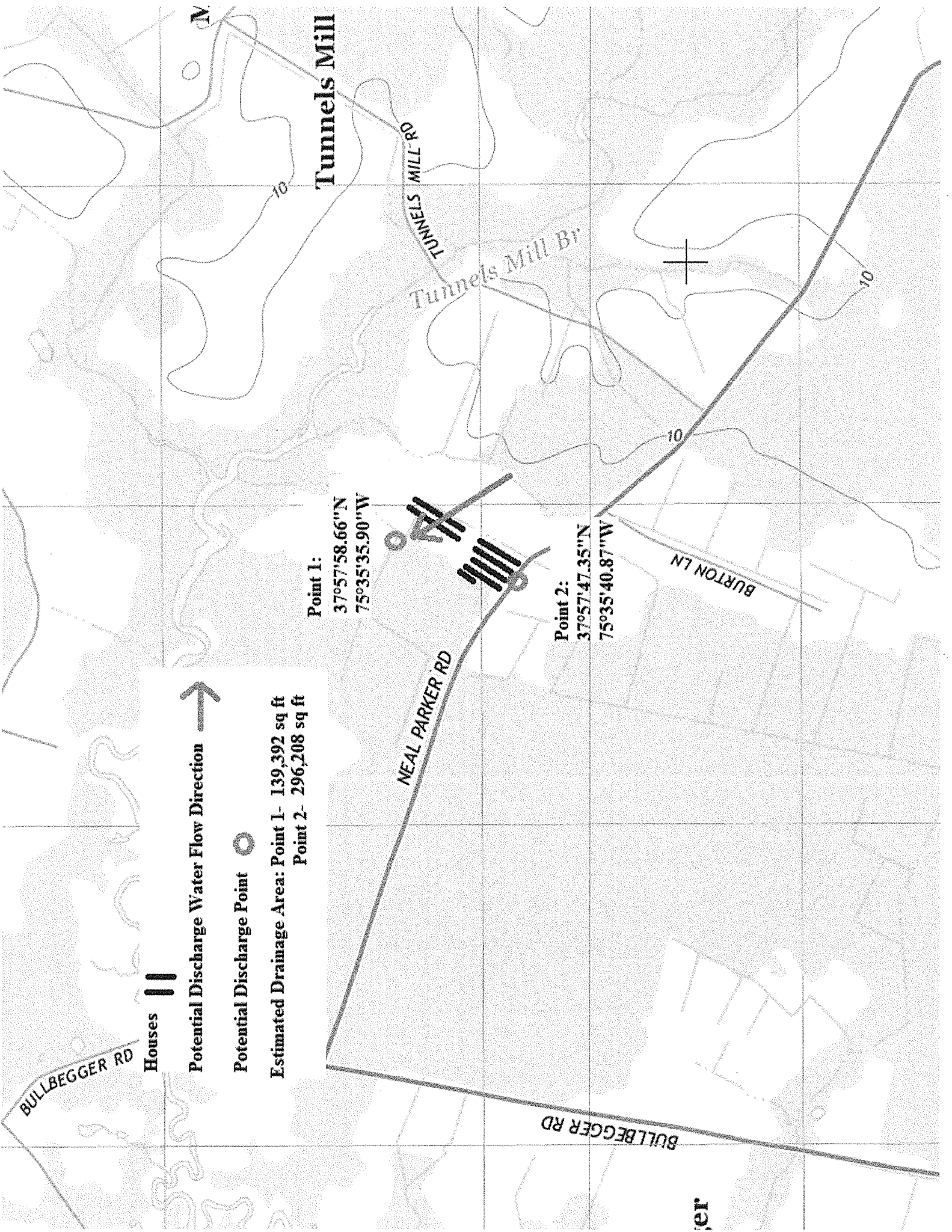
TUNNELS MILL BR

Tunnels Mill Br

BURTON LN

BULLBEGGER RD

BULLBEGGER RD



Houses

Potential Discharge Water Flow Direction

Potential Discharge Point

Estimated Drainage Area: Point 1- 139,392 sq ft
Point 2- 296,208 sq ft

Point 1:
37°57'58.66"N
75°35'35.90"W

Point 2:
37°57'47.35"N
75°35'40.87"W

Tunnels Mill

TUNNELS MILL RD

Tunnels Mill Br

BURTON LN

NEAL PARKER RD

BULLBEGGER RD

BULLBEGGER RD

er

FPNA FARMS, Inc. - VPDES CAFO PERMIT APPLICATION - ATTACHMENT

Re: Permit Application Addendum Section # VI Item C - Description of BMPs listed in Section V

There is no liquid manure at site. Furthermore, the shed is fully covered to protect from wind precipitation, and/or leakage. Occasional storm water run off from the shed and other chicken houses is caught in the ditches which usually evaporates.

Any seepage inside the chicken houses is offset by the tunnel fans.

VIRGINIA POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT (VPDES)
CONCENTRATED ANIMAL FEEDING OPERATIONS (CAFOs)

PERMIT APPLICATION ADDENDUM ATTACHMENT - MORTALITY DISPOSAL METHODS

PLEASE TYPE OR PRINT ALL INFORMATION - ALL PARTS OF THIS FORM MUST BE COMPLETED

OWNER/FARM/FACILITY INFORMATION

Owner Name:	FAYYAZ MUKHTAR
Farm/Facility Name:	FPNA FARMS, Inc.
Location:	5753 Neal PARKER Road, Withams, VA 23488

Each Large CAFO covered by the VPDES Individual CAFO permit must implement additional measures stipulated in the Effluent Limitation Guidelines (ELGs) found in section 40CFR412.37 (a)(4) and stated in the VPDES CAFO Individual Permit.

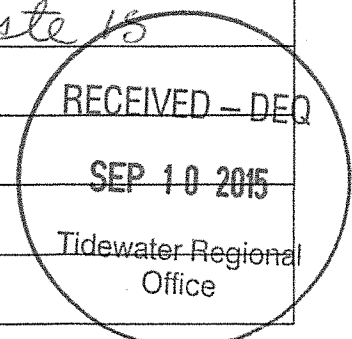
In accordance with the ELGs: Mortalities must not be disposed of in any liquid manure or process wastewater system, and must be handled in such a way as to prevent the discharge of pollutants to surface water, unless alternative technologies pursuant to §412.31(a)(2) and approved by the Director are designed to handle mortalities.

1. Indicate the mortality disposal method or methods to be utilized to ensure compliance with the permit. (check the appropriate box or boxes below)

☐ Render ☒ Compost ☐ Incinerate ☐ Landfill ☐ Other: _____

2. In the space provided below, describe the mortality disposal method or methods to be utilized to ensure compliance with the permit. Include a description of the site where the mortalities will be handled. {i.e.; all routine daily mortality will be disposed by composting in compost bins attached to the poultry litter shed. Poultry carcasses will be picked up on a daily basis from within the poultry houses. These carcasses will be added to the compost pile using accepted composting principles. The poultry litter shed is located on-site behind the poultry houses at the Northwest end of the property.}

Mortalities are composted in the manure shed which is covered to protect from rain/snow + wind. Based on Visual inspection, dead Chickens are picked up daily & transported to the shed by a tractor for disposal. A mortality log is also maintained. The shed is next to Horse # 4 on the left side. All of the stored waste is transferred to others.



**VIRGINIA POLLUTANT DISCHARGE ELIMINATION SYSTEM PERMIT (VPDES)
CONCENTRATED ANIMAL FEEDING OPERATIONS (CAFOs)**

PERMIT APPLICATION ADDENDUM ATTACHMENT – CHEMICAL HANDLING METHODS

PLEASE TYPE OR PRINT ALL INFORMATION - ALL PARTS OF THIS FORM MUST BE COMPLETED

OWNER/FARM/FACILITY INFORMATION

Owner Name:	Fayyaz MUKHTAR
Farm/Facility Name:	FPNA FARMS, Inc,
Location:	5753 Neal PARKER Road, Withams, VA 23482

Each CAFO covered by the VPDES Individual CAFO permit must operate and maintain the CAFO in accordance with §9VAC25-31-200 E.1.e. of the regulation and stated in the VPDES CAFO Individual Permit.

In accordance with the regulation and permit: Chemicals and other contaminants handled at the facility must not be disposed of in any manure, process wastewater, or storm water storage or treatment system unless such systems are specifically designed to treat such chemicals and other contaminants.

1. In the space provided below, provide a description of the practices, procedures and methods which will be followed to ensure that chemicals and other contaminants handled at the facility are not disposed of in any manure, process wastewater, or storm water storage or treatment system unless such systems are specifically designed to treat such chemicals and other contaminants. These same practices, procedures and methods shall be included in the Farm Operating Manual. *(i.e.; all chemicals and other contaminants used at the facility are handled and disposed of in accordance with the manufacturer's labels. At no time, are any chemicals or other contaminants, that are not designed for use in the waste storage and treatment system, disposed of in the system.)*

The use of chemicals +/or other contaminants is minimal. If used, all chemicals/contaminants are handled + disposed of in accordance with the manufacturer's labels. At no time are these products inappropriately disposed of in the waste storage system.

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Tidewater Regional
Office

Molly Joseph Ward
Secretary of Natural Resources

Clyde E. Cristman
Director



Joe Elton
Deputy Director of Operations

Rochelle Altholz
Deputy Director of Administration
and Finance

COMMONWEALTH of VIRGINIA
DEPARTMENT OF CONSERVATION AND RECREATION

600 East Main Street, 24th Floor
Richmond, Virginia 23219
(804)786-6124

October 16, 2014

Mr. Fayyaz Mukhtar
Punjab Farm
P.O. Box 218
Oak Hall, VA 23416

Dear Mr. Mukhtar:

Your Nutrient Management Plan (NMP), dated 10/9/2014, for 170000 Broilers located in Accomack County has been approved by the Virginia Department of Conservation and Recreation for coverage under a Virginia Pollution Abatement (VPA) or Virginia Pollutant Discharge Elimination System (VPDES) permit. Only nutrient recommendations for applications to be made after the date of this letter are approved by this letter. Your NMP was written by a nutrient management planner certified by the Virginia Department of Conservation and Recreation.

A copy of this letter must be kept with your nutrient management plan. A copy of this letter and a copy of the approved plan must be sent to the Regional Office of the Virginia Department of Environmental Quality (DEQ).

It should be noted that this plan expires 10/9/2019. We recommend the process of revising this nutrient management plan begin at least six months prior to the expiration date.

If you have any questions concerning this letter, please contact me at bobby.long@dcr.virginia.gov or (434) 547-8172.

Sincerely,

A handwritten signature in cursive script that reads "Bobby Long".

Bobby Long
Nutrient Management Coordinator – Animal Waste
Division of Nonpoint Pollution Prevention

cc: Tim Sexton, DCR Nutrient Management Program Manager
Stephanie Drzal



NUTRIENT MANAGEMENT PLAN IDENTIFICATION

Operator

Fayyaz Mukhtar
P.O. Box 218
Oak Hall, VA 23416
908-296-2357

Integrator:Perdue

Farm Coordinates

Easting: 180447729, Northing: 4201760, zone: 18

Watershed Summary

watershed: CB32
county:

Nutrient Management Planner

Stephanie Drzal
Department of Conservation and Recreation
Suffolk Regional Office
1548A Holland Rd
Suffolk, VA 23434
stephanie.drzal@dcr.virginia.gov
757-925-2469

Certification Code: 723

Acreage Use Summary

Total Acreage in this plan: 0.

Cropland: 0.
Hayland: 0.
Pasture: 0.
Specialty: 0.

Livestock Summary

Beef Cattle 0
Dairy Cattle 0
Poultry 170000
Swine 0
Other 0

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SEP 10 2015

Tidewater Regional
Office

Manure Production Balance

	Imported	Produced	Exported	Used	Net
kgals	0.	0.	0.	0.	0.
tons	0.	1275.	1275.	0.	0.

Plan written 10/9/2014

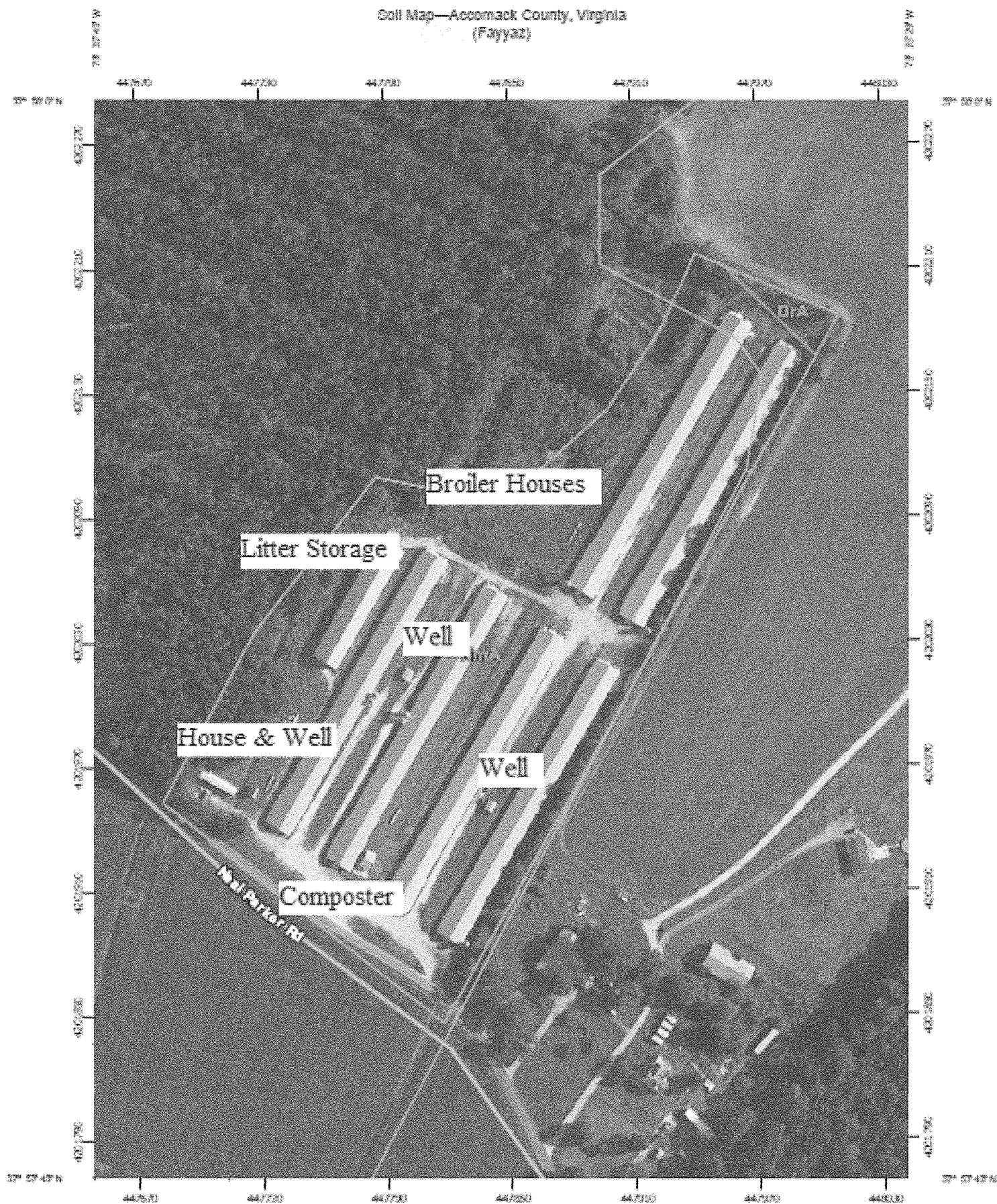
Valid until 10/9/2019

Signature:

Stephanie Drzal
Planner

10/9/14
date

Soil Map—Accomack County, Virginia (Fayyaz)



Map Scale: 1:2,530 if printed on A portrait (8.5" x 11") sheet.



Map projection: Web Mercator Corner coordinates: WGS84 Edge tics: UTM Zone 18N WGS84

5753 Neal Parker Rd

5753 Neal Parker Rd, Withams, VA 23488



Fayyaz Mukhtar Narrative

This plan is written for Mr. Fayyaz Mukhtar who owns and operates six broiler houses for Perdue in Accomack County. The operation is located on Route 693 (Neal Parker Rd) northwest of Oak Hall, VA. The six broiler houses contains 28,300 birds per house for about 170,000 birds per flock and with 5.5 flocks per year for a total of 935,000 birds. About 1275 tons of litter will be produced per year. There is a composter on the operation for daily mortality and a litter storage shed. The litter is all transferred to Benny Hall and J. Thompson and spread throughout Accomack County.

**Nutrient Management Plan Special Conditions for
Virginia Pollution Abatement (VPA) and Virginia Pollutant Discharge
Elimination System (VPDES) Permits**
September 2011

The following management practices will be utilized for poultry operations transferring litter and requiring a VPA or VPDES permit:

1. Representative litter samples will be analyzed at a minimum of once every three (3) years for VPA permits and once per year for VPDES permits for the following: total nitrogen or total Kjeldahl nitrogen (TKN), ammonium nitrogen, total phosphorus, total potassium, calcium, magnesium, and percent (%) moisture. Separate samples shall be taken from all manure sources to be used for application (i.e. house, storage shed, etc.). All manure analyses shall be performed using laboratory methods consistent with *Recommended Methods of Manure Analysis*, publication A3769, University of Wisconsin, 2003 or other methods approved by the Virginia Department of Conservation and Recreation (DCR).
2. If poultry litter is stackable and contains less than 40% moisture, storage may be utilized for up to 14 days on sites meeting the following criteria:
 - Slope is not greater than 7%
 - Site must be at least 100 feet from any surface water, intermittent drainage, wells, sinkholes, rock outcrops and springs
3. Storage sites used for greater than 14 days must be identified in this plan. These sites which are not covered by a roof must meet the following criteria:
 - The litter can not be stored for greater than 180 days, and
 - The waste is covered with a waterproof reinforced tarp (ultraviolet resistant is preferable) or impermeable sheeting of 6 mil thickness or greater that is anchored against wind on the perimeter and weighted on top, and
 - The waste stockpile is protected from stormwater running onto or under it.
4. Loading areas around manure storage facilities and poultry houses that are exposed to rainfall will be maintained so that manure residue is minimal.
5. New waste storage facilities shall be designed, constructed and operated in accordance with the USDA-NRCS *Field Office Technical Guide* and other appropriate NRCS design criteria.
6. Composting of animal mortalities will be conducted in accordance with the latest guidance developed by Virginia Cooperative Extension.
7. This nutrient management plan will be revised at least once every five (5) years to make adjustments for litter nutrient analysis or prior to any waste application.
8. This nutrient management plan must be amended or modified and submitted to DCR for review and approval if animal numbers increase above the level specified in the plan or animal types including intended market weights are changed.

9. The litter transferred from this facility will be transferred in accordance with the Virginia Department of Environmental Quality's requirements and those of other regulatory agencies.
10. These conditions do not override any more restrictive plan requirements if required by other specific legislative, regulatory or incentive programs which apply to a specific operator.

Manure Production Summary

Manure Name: Broiler

Animal Summary
Broiler: 170000

Manure Storage Capacity: 500. tons

Manure Analysis:

TKN: 48.14
P2O5: 37.33
NH4: 10.2
K2O: 53.01

Plant Available Nutrients:

Immediate Incorporation:

31.94 lbs N
37.33 lbs P2O5
53.01 lbs K2O

Surface Applied:

27.86 lbs N
37.33 lbs P2O5
53.01 lbs K2O

Residual N:

yr 1: 4.55 lbs
yr 2: 1.90 lbs
yr 3: .76 lbs

Manure Production

Dec-Feb 319
Mar-May 319
Jun-Aug 319
Sep-Nov 319

Total Produced: 1275

Manure Sold/yr: 1275

Manure purch./yr: 0

Poultry Manure Production Calculation Details

$$\text{production[tons/yr]} = (\# \text{ confined})[\text{birds}] * (\# \text{ cycles})[\text{cycles}] * (\text{prod factor})[\text{tons/cycle/K-bird}] * (0.001)[\text{K-bird/bird}]$$

Group Name	animal	%(#) confined	avg wt	prod factor	produced
Broiler	Broiler	100(170000)	4.00	1.25	1275.

The Agricultural Service Laboratory is a public service of Clemson University.